

FULL DAY KINDERGARTEN PROGRAM

FREQUENTLY ASKED QUESTIONS

1. Who is eligible for the half-day Kindergarten Program?

All students residing in Shirley are eligible for our half-day Kindergarten Program.

2. Will I have to pay tuition for the half-day Kindergarten Program?

No. All students residing in Shirley are eligible to participate in our half-day Kindergarten Program at no charge.

3. Can I choose to have my child participate in the full-day Kindergarten Program?

Yes. Every student residing in Shirley may elect to participate in our full-day Kindergarten Program.

4. Is there a tuition fee if I choose to have my child participate in the full-day Kindergarten Program?

Yes. An annual tuition fee of \$1025.00 per student will be charged.

5. What happens if I feel that I can not afford to pay the tuition fee for full-day Kindergarten?

Tuition assistance is available based upon your income level. The chart below indicates income levels that may qualify you to receive tuition assistance. The income chart is based upon the 2005-2006 federal standards for income eligibility guidelines. Based upon these guidelines, you may be eligible for either free tuition or a reduced tuition rate of \$525 per child.

<u>Free Eligibility Scale</u>				<u>Reduced Price Eligibility Scale</u>		
<u>Family Size</u>	<u>Year</u>	<u>Month</u>	<u>Week</u>	<u>Year</u>	<u>Month</u>	<u>Week</u>
1	\$12,441	\$1,037	\$240	\$17,705	\$1,476	\$341
2	\$16,679	\$1,390	\$321	\$23,736	\$1,978	\$457
3	\$20,917	\$1,744	\$403	\$29,767	\$2,481	\$573
4	\$25,155	\$2,097	\$484	\$35,798	\$2,984	\$689
5	\$29,393	\$2,450	\$566	\$41,829	\$3,486	\$805
6	\$33,631	\$2,803	\$647	\$47,860	\$3,989	\$921
7	\$37,869	\$3,156	\$729	\$53,891	\$4,491	\$1,037
8	\$42,107	\$3,509	\$810	\$59,922	\$4,994	\$1,153
For each additional Family member add....	+\$4,238	+\$354	+\$82	+\$6,031	+\$503	+\$116

6. What do I do if I feel that I qualify for tuition assistance?

If you feel that you may be eligible, based upon the guidelines above, complete the Full Day Kindergarten Program Request for Tuition Assistance Form. Once the Business Office receives your form, an eligibility determination will be made and you will be contacted regarding the decision.

7. What must I do if I want to register my child for the full-day Kindergarten Program?

In order to reserve a slot for your child in the full-day Kindergarten Program you must submit your registration form along with an initial payment equal to one monthly installment by June 1, 2006, unless you qualify for tuition assistance. An \$80.00 discount will be available if you choose to pay the full tuition by June 1, 2006. Checks must be made payable to the “**Town of Shirley**” with the word “kindergarten” in the memo section. Please submit both the Registration Form and payment to:

**Shirley School District
Business Office
34 Lancaster Road
Shirley, MA 01464**

8. When is the balance of the tuition due?

The remaining monthly installments will be due on the first of each month beginning September 2006 and continuing through May 2007.

9. What happens if I am late making my tuition payment?

If the initial payment is not made by June 1, 2006, a slot will not be reserved for your child. If monthly payments (beginning on September 1, 2006) are not received by the 15th of each month, your child may be removed from the program.

10. If I withdraw my child from the Shirley School District or decide to remove my child from the full-day Kindergarten Program, will my tuition payments be refunded?

Yes, the tuition will be prorated on a monthly basis.

11. Will I receive a monthly tuition bill from the school district?

No, monthly tuition bills will not be provided.

12. Can I choose to send my child to the full-day Kindergarten Program for less than 5 days per week?

No, our full-day Kindergarten Program is designed as a 5 day per week program.

13. Are Devens students required to pay the tuition fee for the full-day Kindergarten Program?

No. The current Devens Education Contract includes a per pupil tuition fee.

14. Do School Choice students need to pay the tuition fee?

No. The Shirley School District receives reimbursement from the sending District for a full-day program.



FULL DAY KINDERGARTEN

REGISTRATION / CONTRACT

Student's Full Name:	
Parent / Guardian Name:	
Street Address:	
Mailing Address (if different):	
Home Phone:	Work Phone:

I would like to enroll my child in the full-day Kindergarten Program for school year 2006-2007. I understand that:

- The annual fee is \$1025.00 per child, unless I qualify for tuition assistance.
- If I pay the full tuition by June 1, 2006 I will be given a discount of \$80.00 which will reduce the annual tuition to \$945.00.
- The completed Registration Form is due on June 1, 2006 in order to guarantee my child a slot in the program.
- The initial payment equal to one monthly installment is due on June 1, 2006 in order to guarantee my child a slot in the program.
- Monthly payments will be due on the first day of each month beginning on September 1, 2006 and continuing through May 1, 2007.
- If tuition payments are not received by the 15th of each month, my child may be removed from the full-day Kindergarten Program.
- If I withdraw my child from the Shirley School District or decide to remove my child from the full-day Kindergarten Program, my tuition payments will be prorated on a monthly basis.
- The Shirley School District will not send me a monthly tuition bill.
- I may be eligible for tuition assistance and have completed the "Full-Day Kindergarten Program Request for Tuition Assistance Form" found on the reverse side of this Registration/Contract.

Parent/Guardian Signature

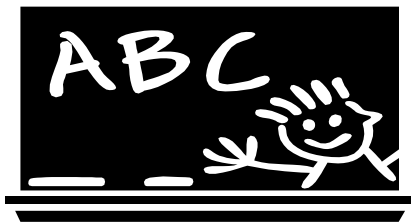
Date

- ☐ I have completed the Registration / Contract Form and enclosed my initial payment of \$102.50.
- ☐ I have completed the Registration / Contract Form and applied for tuition assistance.

Mail this Registration/Contract Form, along with a check or money order (no cash please) made payable to the **Town of Shirley** with "kindergarten" in the memo section by June 1, 2006 to the following address: Shirley School District, Business Office, 34 Lancaster Road, Shirley, MA 01464. Questions should be directed to the Business Office at (978) 425-2630 extension #401.

For Office Use Only:

Status: _____ Total Amount due: \$ _____ Payment Date/ Amount: 1) _____ 2) _____



FULL DAY KINDERGARTEN PROGRAM REQUEST FOR TUITION ASSISTANCE

STUDENT'S FULL NAME: _____

Part 1. Food stamps or TANF case number		
Does this child have a Food Stamp/TANF case number?	YES	NO
Please provide case # _____. Skip to Part 4.		

Part 2. Foster Child		
If this application is for a child who is the legal responsibility of a welfare agency or court, list the amount of the child's personal use monthly income: \$ _____. Skip to Part 4.		

Part 3. Total Household Income from Last Month—You must tell us how much you earned and how often					
1. Name (List everyone in household)	2. Last month's income and how often it was received <i>Example: \$100/monthly \$100/twice a month \$100/every other week \$100/weekly</i>				3. Check if NO income
	Earnings from work before deductions	Welfare, child support, alimony	Pensions, retirement, Social Security	Other	
<i>(Example)</i> <i>Jane Smith</i>	<u>\$200/weekly</u>	<u>\$150/weekly</u>	<u>\$100/monthly</u>	<u>\$ ____/____</u>	<input type="checkbox"/>
	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<input type="checkbox"/>
	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<input type="checkbox"/>
	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<input type="checkbox"/>
	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<input type="checkbox"/>
	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<u>\$ ____/____</u>	<input type="checkbox"/>

Part 4. Signature and Social Security Number (Adult must sign)	
An adult household member must sign the "Request for Kindergarten Tuition Assistance." If Part 3 is completed, the adult signing the form must also list his or her Social Security Number or mark the "I do not have a Social Security Number" box.	
Privacy Act Statement: This explains how we will use the information you give us.	
The Full Day Kindergarten Tuition Assistance Program requires the information on this application. You do not have to give the information, but if you do not, we cannot approve your children for tuition assistance. The Social Security Number of the adult household member who signs this application is required unless you list Food Stamp or TANF case numbers of all children you are applying for, OR if you are applying for a foster child. You must check the "I do not have a Social Security Number" box if the adult household member signing the application does not have a Social Security Number. We MAY share your eligibility information with education, health, and nutrition programs to help evaluate, fund, or determine benefits for their programs, auditors for program reviews, and law enforcement officials to help them look into misuse of program rules.	
<i>I certify (promise) that all information on this application is true and that all income is reported I understand that school officials may verify (check) this information. I understand that if I purposely give false information, my children may lose tuition assistance benefits, and I may be prosecuted.</i>	
Parent/Guardian Signature for Tuition Assistance: _____	
Social Security Number: ____ - ____ - _____ <input type="checkbox"/> I do not have a Social Security Number	

OFFICE USE ONLY	
Monthly Income Conversion: Weekly x 4.33, Every 2 Weeks x 2.15, Twice A Month x 2	
Monthly Income: _____	Household size: ____ FS/TANF: ____ Date Withdrawn: _____
Eligibility: Free ____ Reduced ____ Denied ____ Reason: _____	
Determining Official's Signature: _____	Date: _____